

## Review article

# Health Promotion at Workplace: Enhancing health status of workforce

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### Introduction

The term "Health Promotion at Workplace" is a multidimensional concept that embraces at least two major philosophies about what health is and how it is influenced. The first philosophy sees health as largely the product of individual behaviour and as an individual responsibility. It may acknowledge the role of genetics and environment to some degree, but the type of health promotion arising from this set of beliefs focuses on individual behaviour. Consequently, the workplace is seen primarily as a venue through which various programmes can be delivered. Examples of programme areas are: fitness, stress management, smoking cessation, back care, weight reduction/nutrition, and medication. The second philosophy sees health as being influenced by a number of forces, a significant number of which are outside the individual's control. Consequently, the workplace is seen as an influence on health in its own right.<sup>1</sup>

The European Network for health promotion at workplace has defined as the combined efforts of employers, employees and society to improve the health and well-being of people at work. This vision of health promotion at workplaces particular emphasis on improving the work organization and working environment, increasing workers' participation in shaping the working environment and encouraging personal skills and professional development. Health promotion at workplace focuses on a number of factors that may not be sufficiently covered in the legislation and practice of occupational health programmes, such as the organizational environment, the promotion of healthy lifestyles, and non-occupational factors such as family welfare, home and commuting conditions and community factors which affect workers' health.<sup>1</sup>

### Goals of Health Promotion at Workplace

Main goals of health promotion are improving the work organization and the working environment; encouraging personal development, promoting active participation of workers in healthy activities. Workplace health promotion supports a participatory process to help promote a stronger implementation of occupational and environmental health legislation. It suggests tools for maintaining or strengthening a national healthy workplace initiative, such as an awards system as an incentive for participating enterprises, and creation of healthy workplace networks. To be successful, workplace health promotion has to involve the participation of employees, management and other stakeholders in the implementation of jointly agreed

initiatives and should help employers and employees at all levels to increase control over and improve their health.<sup>2</sup> While some health promotion activities in the workplace tend to focus on a single illness or risk factor (e.g. prevention of heart disease) or on changing personal health practices and behaviours (e.g. smoking, diet), there is a growing appreciation that there are multiple determinants of workers' health. In addition to person-focused interventions, workforce health promotion initiatives have moved toward a more comprehensive approach, which acknowledges the combined influence of personal, environmental, organizational, community and societal factors on employee well-being.<sup>2</sup> At workplace health promotion have organizational commitment to improving the health of the workforce. A healthful environment provides an appropriate information and establishing comprehensive communication strategies towards employees and involving them in decision making processes, implementing policies and practices, developing a working culture based on partnership.<sup>2</sup>

### Strategies of Health Promotion at Workplace

Participation of all staff must be included in all program stages. Project management programs must be oriented toward the problem-solving cycle. Programs must be incorporated into company management practices and workplace health-promotion strategies should influence corporate planning. Comprehensiveness programs must incorporate interdisciplinary individual directed and environment-directed health strategies. Health education, focused on skill development and lifestyle behavior change along with information dissemination and awareness building.<sup>3</sup> Integration of the worksite program into the organization's benefits, human resources infrastructure, and environmental health and safety initiatives.<sup>4</sup> Strategies should include promotes health programs like health education class, access to local fitness facilities, employees health insurance, provide healthy food in cafeterias etc. Workplace program should involve a coordinated, systematic and comprehensive approach. Screening is required followed by counseling and education on how to best use medical and other services for necessary follow-up.<sup>5</sup>

### The Workplace: A Priority Setting for Health Promotion

The workplace, along with the school, hospital, city, island, and marketplace, has been established as one of the priority settings for health promotion into the 21st century. The workplace directly influences the physical, mental, economic and social well-being of workers and

in turn the health of their families, communities and society. It offers an ideal setting and infrastructure to support the promotion of health of a large audience. The health of workers is also affected by non-work related factors.<sup>5</sup> The concept of the health promoting workplace is becoming increasingly relevant as more private and public organizations recognize that future success in a globalizing marketplace can only be achieved with a healthy, qualified and motivated workforce.<sup>6,7</sup> A health promoting workplace can ensure a flexible and dynamic balance between customer expectations and organizational targets on the one hand and employee's skills and health needs on the other, which can assist companies and work organizations to compete in the marketplace. For nations, the development of health promoting workplace will be a pre-requisite for sustainable social and economic development.<sup>8,9</sup>

#### **Health promotion at Workplace: Bangladesh Perspective**

Health promotion and safety at work are considered to be very important issues as they are intrinsically linked with the overall well-being of working people. Occupational health have been repeatedly mentioned as a fundamental right of every worker, and are referenced in the Alma Ata Declaration on Primary Health Care in 1978, the WHO constitution, the UN's Global Strategy on Health for All by the year 2000, the ILO Convention in 1919 and in many other multilateral conventions and documents along with the National Labor Law of Bangladesh.<sup>8</sup> However, status of occupational health in health promotion at workplace in developing countries like Bangladesh is especially problematic, with workers bound to work in an unsafe working environment where there is little regard for the promotion of health issues and inadequate monitoring from any public or civil society organization.<sup>9,10</sup>

A comprehensive strategy is being developed by the Human Resource Development Unit of Ministry of Health & Family Welfare, Bangladesh Secretariat (MOHFW). Bangladesh Workforce Strategy focused on integrating the system of managing and accreditation of human resources across the public, private and NGO sectors.<sup>10</sup> The strategies were: development of a plan for health promotion at workplace, improved incentives to work in rural and remote areas, increased community-focused aspects into training programs, and improved quality of health workforce education and planning, including improving the capacity of teaching and training institutions with a shift from a more knowledge-based to skills-based approach; ILO Convention 155 on occupational health outlines action to be taken by our governments and within enterprises to promote occupational health and to improve working conditions.

The challenges still remains in health promotion at workplaces are overcrowding and poor sanitation, lack of awareness, lack of training program regarding appropriate use of machine, and personal protective devices, poor implementation of law and commitment. It needs to be acknowledged that health, as we experience and observe it in the workplace, is produced or manufactured by two major forces.<sup>11</sup>

- What employees bring with them to the workplace in terms of personal resources, health practices, beliefs, attitudes, values.
- What the workplace does to employees once they are there in terms of organization of work in both the physical and psychosocial sense.

The connection between the physical and psychosocial environments, and the term "organization of work" that includes both, has been made by the fact that both are heavily influenced by high level management choices and decisions about how work will be organized. When this interaction between the physical environment ("the safety of places and things") and the psychosocial environment ("culture and climate") is taken into account, their joint impact on health is significant.<sup>12</sup> Organization of work can also affect productivity in two ways; directly and indirectly: directly, through the design of physical and psychosocial work systems; indirectly, through management practices that cause anxiety, depression, and other negative emotional states that are antagonistic to productivity and can also contribute to physical disease processes.<sup>13</sup>

#### **Benefits of Health Promotion at Workplace**

Health promotion at workplace improving the employability of workers, through workplace redesign, maintenance of a healthy and safe work environment; a well-managed training and retraining assessment of work demands and safety programme, medical diagnosis, health screening and assessment of functional capacities. Healthy workers are productive and raise healthy families; thus healthy workers are a key strategy, i.e., goal, for overcoming poverty. Occupational health is fundamental to public health, for it is increasingly clear that major diseases (e.g. AIDS, heart disease) need workplace programmes as part of the disease control strategy.<sup>14-16</sup> Workplace health risks are higher in the informal sector and small industry which are key arenas of action on poverty alleviation, where people can work their way out of poverty. Sustainable development, which is the key to poverty reduction. It also improved staff morale, reduced staff turnover and absenteeism, reduced risk of fines and reduced health and insurance cost. Health promotion at workplace enhanced self-esteem, increased job satisfaction; promote skills for health protection, improved sense of wellbeing of the employee. As a whole health promotion at workplace shows a positive and

caring image of an organization and a safe and healthy work environment to the workers.<sup>17, 18</sup>

To the organization	To the employee
a well-managed safety programme	a safe and healthy work environment
a positive and caring image	enhanced self-esteem
improved staff morale	reduced stress
reduced staff turnover	improved morale
reduced absenteeism	increased job satisfaction
increased productivity	increased skills for health protection
reduced health care/ insurance costs	improved health
reduced risk of fines and litigation	improved sense of well-being

**Conclusion**

Health promotion that introduces healthy lifestyles and supports the maintenance of such lifestyles with appropriate information, counseling and educational measures is a part of the occupational health and safety programme. Health promotion at workplace have been shown to have a number of beneficial outcomes - improvements in working relationships, supports the maintenance of lifestyles with appropriate information and this is for both employers and employees.<sup>19</sup> On the other hand, health promotion at workplace creates better public image for the organization by reduction in health indemnity and other expenditure that is associated with increases productivity and profitability of the organization.

**Recommendation**

Health promotion at workplace suggests that health promotion programmes will only be effective in enhancing the health status of the workforce when the interventions attend to both individual and environmental influences. A comprehensive approach to health promotion in the workplace is therefore needed for individual and organizational benefit and well being. Government, non government and stake holders should keep in mind that workplace health promotion is an important setting for the betterment of individual, organizations, community and as a whole for the nation for achieving global challenges for healthy, qualified and motivated workforce.<sup>20</sup>

**References**

1. The Luxembourg Declaration. Declaration on Workplace Health Promotion in the European Union, Europe; 1997.
2. Ten great public health achievements--United States, 1900-1999 MMWR Morb Mortal Wkly Re ;2001, 48: 241-243.

3. Kuhn K, Henke N. Healthy employees in healthy organizations: the European Network for Workplace Health Promotion. WHIP in Europe. Dortmund: Federal Institute for Occupational Safety and Health; 2001.
4. European Network for Workplace Health Promotion Healthy employees in healthy organizations; Good practice in workplace health promotion (WHP) in Europe. German; 1999.
5. Polanyi MFD, Shannon HS. Promoting the determinants of good health in the workplace. Settings for health promotion: linking theory and practice. Thousand Oaks, CA: Sage Publication; 2000.
6. Carter SM. What is health promotion ethics? Health Promot J Austr; 2012; 23: 4.
7. Amick III BC, Robertson MM Effect of office ergonomics intervention on reducing musculoskeletal symptoms. Spine; 2003,28:2706-11
8. Eakin JM. Promoting the determinants of good health in the workplace. Settings for health promotion: linking theory and practice. Thousand Oaks, CA: Sage Publications; 2000.
9. Rice ME. Effective Global Health Promotion Achievements, Tools, and Strategies Used in the Americas over the Past Decade. Health Promot Pract; 2000, 13: 313-319.
10. Ministry of Health & Family Welfare, Bangladesh Secretariat (MOHFW). Bangladesh Workforce Strategy; 2008.
11. Moos MK. Preconception Health Promotion: Opportunities Abound. Matern Child Health; 2002, 6: 71-73.
12. Health care Network of Bangladesh under the Ministry of Health and Family Welfare; 2011.
13. Potvin L, Jones CM. Twenty-five years after the Ottawa Charter: the critical role of health promotion for public health. Can J Public Health; 2011, 102:244-250.
14. European Network for Workplace Health Promotion Healthy employees in healthy organizations; Good practice in workplace health promotion in Europe. German; 2001.
15. Nutbeam D. Evaluating Health Promotion-Progress, Problems and solutions. Health Promot Int; 1998 13: 27-44.
16. Laverack G, Keshavarz MN. What remains for the future: strengthening community actions to become an integral part of health promotion practice? Health Promot Int; 2001, 26: ii258-ii262.
17. Rimmer JH. Health Promotion for People with Disabilities: The Emerging Paradigm Shift from Disability Prevention to Prevention of Secondary Conditions. Phys Ther; 1999: 79: 495-502.
18. O'Donnell MP. Definition of health promotion: embracing passion, enhancing motivation, recognizing dynamic balance, and creating opportunities. Am J Health Promot; 2009: 24.
19. Schiavo R. Health Communication – From theory to Practice. (Istedn), Jossey- Bass, San Fransico, California; 2007.
20. Glasgow RE, Klesges LM, Dzewaltowski DA, Bull SS, Estabrooks P. The future of health behavior change research: what is needed to improve translation of research into health promotion practice? Ann Behav Med; 2009, 27: 3-12.
21. National Research Council and Institute of Medicine. Musculoskeletal disorders and the workplace: low back and upper extremities. Washington, DC: National Academy Press; 2001:301-329.